



DOCKET NO. END-5313

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: T. Douglas Mast, et al.

Serial No.: 10/825,092

Art Unit: 3739

Filed : April 15, 2004

Examiner: Not Assigned

For : ULTRASOUND MEDICAL TREATMENT SYSTEM AND METHOD

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August 15 2004

(Date of Deposit)

Linda F. Hansen

(Name of applicant, person mailing, assignee, or Registered Representative)

(Signature)

August 25 2004

(Date of Signature)

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Authorization TO CHARGE STATUTORY BASIC FILING FEE

Dear Sir:

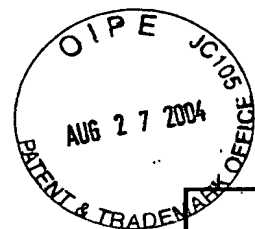
Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney and Fee Transmittal for the application of T. Douglas Mast, et al. entitled ULTRASOUND MEDICAL TREATMENT SYSTEM AND METHOD attorney Docket No. END-5313, to complete, pursuant to Rule 51, this application filed on April 15, 2004 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/END-5313/VEK in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/END-5313/VEK. This sheet is submitted in triplicate.

Respectfully submitted,

Verne E. Kreger, Jr.  
Reg. No. 35,231  
Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(513) 337-3295  
August 25 2004



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)  
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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing <b>OR</b> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	END-5313
	First Named Inventor	T. Douglas Mast
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10/825,092
	Filing Date	April 15, 2004
	Group Art Unit	3739
	Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ULTRASOUND MEDICAL TREATMENT SYSTEM AND METHOD**  
(Title of the Invention)

the specification of which

☐ is attached hereto  
**OR**

☒ was filed on (MM/DD/YYYY) **April 15, 2004** as United States Application Number or PCT International Application Number  
**10/825,092** and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



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Application Serial No.	Filing Date	Status
		Patented Patented Patented

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☒ Practitioners at Customer Number **000027777** →

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AND

☒ Practitioner(s) named below:

Name

Douglas Erickson,  
Mark Levy

Registration Number

29, 530  
27, 922

C/O Thompson Hine, LLP  
2900 Courthouse Plaza NE  
PO Box 8801  
Dayton, Ohio 45401-8801  
Tel 937-443-6600

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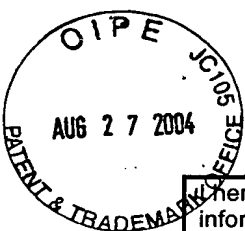
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Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) T. Douglas

Family Name  
or Surname Mast

Inventor's  
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Waseem

Family Name  
or Surname Faidi

Inventor's  
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue, Clifton Park, New York 12065

City Clifton

State NY

ZIP 12065

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Inder Raj S.

Family Name  
or Surname Makin

Inventor's  
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

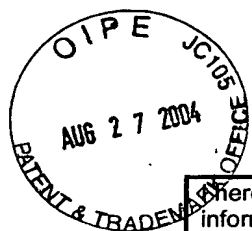
Mailing Address 11388 Donwiddle Drive

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Signature

Date

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City Cincinnati

State OH

ZIP 45242

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Family Name  
or Surname Barthe

Inventor's  
Signature

Date

Residence: City Phoenix

State AZ

Country USA

Citizenship USA

Mailing Address 4818-1 E. Hazel Driver

City Phoenix

State AZ

ZIP 85044

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Michael H.

Family Name  
or Surname Slayton

Inventor's  
Signature

Date

Residence: City Tempe

State AZ

Country USA

Citizenship USA

Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

Country USA



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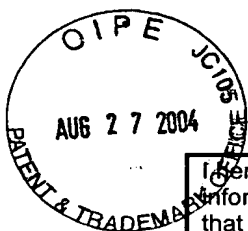
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NAME OF SOLE OR FIRST INVENTOR:

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Given Name  
(first and middle [if any]) T. Douglas

Family Name  
or Surname Mast

Inventor's  
Signature

Date

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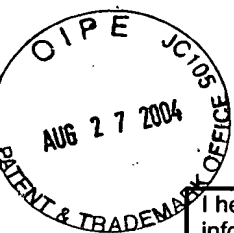
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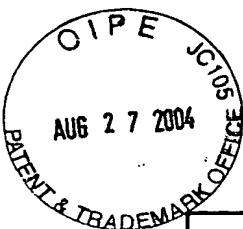
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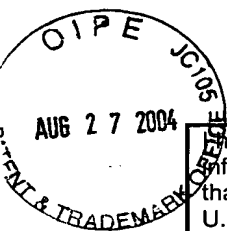
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ZIP 12065

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Inder Raj S.

Family Name  
or Surname Makin

Inventor's  
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA



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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Megan M.

Family Name  
or Surname Runk

Inventor's  
Signature

Date

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State OH

Country USA

Citizenship USA

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ZIP 45242

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NAME OF FIFTH INVENTOR:

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or Surname Barthe

Inventor's  
Signature

Date

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State AZ

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Citizenship USA

Mailing Address 4818-1 E. Hazel Driver

City Phoenix

State AZ

ZIP 85044

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Michael H.

Family Name  
or Surname Slayton

Inventor's  
Signature

Date

Residence: City Tempe

State AZ

Country USA

Citizenship USA

Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

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Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)  
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	END-5313
	First Named Inventor	T. Douglas Mast
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10/825,092
	Filing Date	April 15, 2004
	Group Art Unit	3739
Examiner Name		

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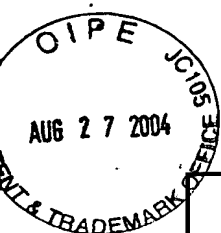
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Application Number(s)	Filing Date (MM/DD/YYYY)	
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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer  
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Label Here

AND

☒ Practitioner(s) named below:

Name

Douglas Erickson,  
Mark Levy

Registration Number

29, 530  
27, 922

C/O Thompson Hine, LLP  
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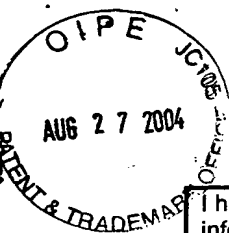
State:

ZIP

Country

Telephone:

Fax: (513) 337-8489



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**NAME OF SOLE OR FIRST INVENTOR:**

☐ A petition has been filed for this unsigned inventor

**Given Name**  
(first and middle [if any]) T. Douglas

**Family Name**  
or Surname Mast

**Inventor's**  
**Signature**

**Date**

**Residence: City** Cincinnati

**State** OH

**Country** USA

**Citizenship** USA

**Mailing Address** 3907 Lansdowne Avenue

**City** Cincinnati

**State** OH

**ZIP** 45236

**Country** USA

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**NAME OF SECOND INVENTOR:**

☐ A petition has been filed for this unsigned inventor

**Given Name**  
(first and middle [if any]) Waseem

**Family Name**  
or Surname Faidi

**Inventor's**  
**Signature**

**Date**

**Residence: City** Clifton Park

**State** NY

**Country** USA

**Citizenship** Jordan

**Mailing Address** 702 Solomon Avenue, Clifton Park, New York 12065

**City** Clifton

**State** NY

**ZIP** 12065

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or Surname Makin

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**Signature**

**Date**

**Residence: City** Loveland

**State** OH

**Country** USA

**Citizenship** USA

**Mailing Address** 11388 Donwiddle Drive

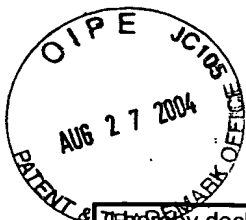
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**ZIP** 45140

**Country** USA





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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Megan M.

Family Name  
or Surname Runk

Inventor's  
Signature

*Megan Runk*

Date

*Aug. 16, 2004*

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

State OH

ZIP 45242

Country USA

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Inventor's  
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Citizenship USA

Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

Country USA



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POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number	END-5313
First Named Inventor	T. Douglas Mast
COMPLETE IF KNOWN	
Application Number	10/825,092
Filing Date	April 15, 2004
Group Art Unit	3739
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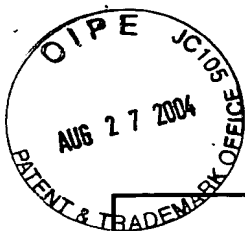
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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer  
Number Bar Code  
Label Here

AND

☒ Practitioner(s) named below:

Name

Douglas Erickson,  
Mark Levy

Registration Number

29, 530  
27, 922

C/O Thompson Hine, LLP  
2900 Courthouse Plaza NE  
PO Box 8801  
Dayton, Ohio 45401-8801  
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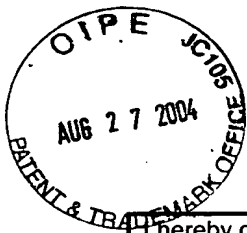
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ZIP

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NAME OF SOLE OR FIRST INVENTOR:

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Given Name  
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Family Name  
or Surname Mast

Inventor's  
Signature

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NAME OF SECOND INVENTOR:

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or Surname Faidi

Inventor's  
Signature

Date

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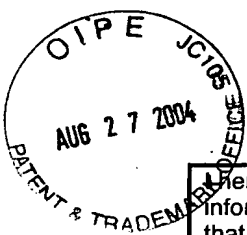
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ZIP 45236

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Waseem

Family Name  
or Surname Faidi

Inventor's  
Signature

Date

8/12/04

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue, Clifton Park, New York 12065

City Clifton

State NY

ZIP 12065

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Inder Raj S.

Family Name  
or Surname Makin

Inventor's  
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

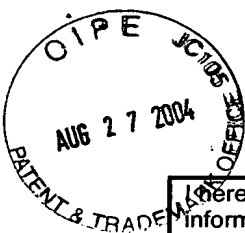
City Loveland

State OH

ZIP 45140

Country USA





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<b>NAME OF FOURTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) Megan M.		<b>Family Name</b> or Surname Runk	
<b>Inventor's</b> <b>Signature</b>		<b>Date</b>	
<b>Residence: City</b> Cincinnati	<b>State</b> OH	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 8920 Spooky Ridge Lane			
<b>City</b> Cincinnati	<b>State</b> OH	<b>ZIP</b> 45242	<b>Country</b> USA

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<b>NAME OF FIFTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) Peter G.		<b>Family Name</b> or Surname Barthe	
<b>Inventor's</b> <b>Signature</b>		<b>Date</b>	
<b>Residence: City</b> Phoenix	<b>State</b> AZ	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 4818-1 E. Hazel Driver			
<b>City</b> Phoenix	<b>State</b> AZ	<b>ZIP</b> 85044	<b>Country</b> USA

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<b>NAME OF SIXTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) Michael H.		<b>Family Name</b> or Surname Slayton	
<b>Inventor's</b> <b>Signature</b>		<b>Date</b>	
<b>Residence: City</b> Tempe	<b>State</b> AZ	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 1323 E. Whalers Way			
<b>City</b> Tempe	<b>State</b> AZ	<b>ZIP</b> 85283-2149	<b>Country</b> USA